



CITY OF  
**BLOOMINGTON**  
MINNESOTA

# HVAC Permit Application

*Office use only*

Permit no.

Site address	Date		
Tenant/building name	Suite/unit no.		
Applicant is	<input type="checkbox"/> Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Architect/engineer	Condominium no.	
<b>Property owner</b>			
Name	Phone		
Address	City	State	Zip
<b>Contractor</b>			
Name			
Address	City	State	Zip
Phone	Cell phone	License no.	
<b>Architect/engineer</b>			
Name			
Address	City	State	Zip
Phone	Cell phone	Registration no.	
<b>Class of work</b>			
<i>Check only one.</i>	<input type="checkbox"/> 1 New <input type="checkbox"/> 3 Alteration/remodel	<input type="checkbox"/> 2 Addition <input type="checkbox"/> 4 Maintenance/repair/replace	
<b>Type of structure</b>			
<i>Check only one.</i>	<input type="checkbox"/> 01 Single-family residential <input type="checkbox"/> 45 Recreational, amusement <input type="checkbox"/> 02 Single-family connected to single family <input type="checkbox"/> 46 Other non-housekeeping shelter <input type="checkbox"/> 03 Residential garage <input type="checkbox"/> 65 Industrial buildings <input type="checkbox"/> 30 Two-family residential <input type="checkbox"/> 70 Public works and utilities building <input type="checkbox"/> 31 Three-four family residential <input type="checkbox"/> 80 Public schools <input type="checkbox"/> 32 Multiple-family residential <input type="checkbox"/> 81 Private schools <input type="checkbox"/> 40 Offices, banks, professional <input type="checkbox"/> 85 Churches and religious buildings <input type="checkbox"/> 41 Stores, restaurants, warehouse <input type="checkbox"/> 88 Hospitals and institutional buildings <input type="checkbox"/> 42 Hotels, motels <input type="checkbox"/> 93 Other non-residential building <input type="checkbox"/> 43 Parking garage <input type="checkbox"/> 95 Fences, signs, antennas <input type="checkbox"/> 44 Service stations and repair garage <input type="checkbox"/> 96 Other non-building structures		

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**Project details**

Job valuation \$ \_\_\_\_\_

Estimated completion date \_\_\_\_\_

Description of work \_\_\_\_\_  
\_\_\_\_\_*Fill in the appropriate blanks and check the correct boxes in the tables below*

Make	Model no.	Conn. load	Fuel	Flue dia.	Input (BTU)	CFM	Tons	HP

**HVAC and refrigeration systems**

- Central system
- Add/alter/repair to central system
- Replacements to central system
- Add air conditioning

**Ventilation//exhaust systems**

- Central system up to 200 CFM
- Single-family
- Multi-family: No. of units \_\_\_\_\_
- Commercial/industrial

**LP to natural gas conversion (includes piping)**No. of space heating units \_\_\_\_\_  
No. of minor appliances \_\_\_\_\_**Miscellaneous**

- Gas piping: No. of units: \_\_\_\_\_
- Central electric heating
- Process equipment
- Gas fireplaces
- Refrigeration equipment
- Heat loss calculation

Effective **FEES** **1.5% of job valuation plus state surcharge. (Job valuation X .0005). Minimum fees:**  
7/1/2010 **Residential \$30 plus state surcharge; Commercial \$40 plus state surcharge. Plan review fee: 10% of permit fee when job valuation exceeds \$50,000.**

**Please read and sign**

I hereby apply for a heating, ventilating and air conditioning permit and I acknowledge that the information above is complete and accurate; that the work will be in conformance with the ordinances and codes of the City of Bloomington and with the Minnesota Building/Mechanical Codes; that I understand this is not a permit but only an application for a permit and work is not to start without a permit; that the work will be in accordance with the approved plan in the case of all work which requires review and approval of plans.

Applicant's printed name \_\_\_\_\_

Applicant's signature \_\_\_\_\_

Date \_\_\_\_\_

**Do not write below this line**

No. of ORSAT tests required \_\_\_\_\_

Conditions of issuance \_\_\_\_\_  
\_\_\_\_\_**Fee information**Other fees?  Yes  No      Describe \_\_\_\_\_ Amount \$ \_\_\_\_\_Double fee?  Yes  No

Number of additional inspections: \_\_\_\_\_

Permit approved by \_\_\_\_\_ Date \_\_\_\_\_